



Appendix K Guidance: Participant-directed Services

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Georgia Department of Behavioral Health & Developmental Disabilities

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Amy Riedesel, Director of Community Services
Barbara (Babs) J. Hall, Family Support Manager



Amy Slide

Good afternoon and thank you for joining us today to learn more about Appendix K and its use with NOW and COMP waiver services. We recognize that information has continued to shift over the last few weeks and we appreciate your patience. Due to the nature of this crisis, DBHDD has had to continue to make revisions and clarifications based on changes in recommendations, feedback and requirement guidance received. We appreciate all of you for continuing to work with us as we navigate this crisis together. Hopefully, everyone received a copy of the Frequently asked questions (or FAQ) that went out last week from our previous PD call together. We took your 48 pages of questions and filtered them down to the 5 main topic areas, which we will address today. We appreciate the questions and will answer more questions at the end of this call. We ask that you listen to what is being explained here on the call. DBHDD recognizes that all the operational decisions made and will be discussed today will not be as flexible as you would like. Appendix K has given DBHDD some flexibility with you to navigate the crisis and to attempt to meet your health and safety needs. It is not meant to expand your services based on your wants or nice to haves. We are attempting to keep you whole until the pandemic ends and staff and services can return to 'normal'. Changes made during the period of appendix K are temporary and will revert back to regular, established PD NOW and COMP waiver policy upon termination of the K. Division Director Wakefield has mention in the past and I would like to reiterate, DBHDD has no intention to just suddenly wake up a month from now and

terminate the K. We monitor data of what is going on in Georgia and there will be fair warning as to the end date of the Appendix K.

Also note, Babs and I may repeat ourselves a few times throughout the presentation. That is done on purpose as we are all adult learners, and as adult learners sometimes we have to hear things a few times for it to resonate.

I am happy to have Babs Hall, DBHDD Participant-direction manager here with me today. She has worked long hours beside me pulling together all the information we are sharing. (I will not mention what time in the AM she emailed me back last night....oh sometime after midnight. I thank her and the rest of my PD team for their continued dedication to the work.) And I promise you the work will continue. So, Babs and I together we will be sharing the content. Kingsley Igunbor and Adrienne Johnson, DBHDD PD Coordinators are also on the call.

Babs would you like to say good afternoon and take us through the agenda.....

Agenda	
Appendix K Recap	Budgets
Family Hires	Support Coordination
Retainer Payments	Communication
Telehealth	Questions

Babs Slide -

Thanks Amy and good afternoon everyone! I am glad you have joined us again today and hope everyone is safe and well.

Before we begin, please note that the PowerPoint presentation for today's webinar will be archived onto the DBHDD website. Additionally, the PowerPoint presentation from the previous webinar on April 15th can also be found on the DBHDD website. Again, the DBHDD website is www.DBHDD.Georgia.gov

Today, Amy and I are going to provide a recap of Appendix K. Since our email list continues to grow, we know may have some first-time listeners on our call today. We want to welcome you and also take a moment to get you up to speed. We thank you for reaching out to your fellow Participant-direction families to inform them of DBHDD's communication avenues to keep people up to date on issues and solutions. We are going to provide some more specifics today around Family Hires, Retainer Payments (or PAR- personal assistance retainer), services with telehealth options, a few budget updates, and your work with your support coordinators . As a reminder, if we use the term FI, this is referring to your Fiscal Intermediary OR also known as your Fiscal Agent. We'd like to thank the three Fiscal Intermediary agencies for their continued collaboration with us to make the necessary changes to implement the K.

Appendix K Recap

Babs Slide -

Appendix K is a temporary set of guidance approved by the Centers for Medicaid and Medicare services to waive portions of waiver policy for NOW and COMP waivers during the pandemic. These flexibilities are only in place during the time period Appendix K is authorized to address health and safety needs. If you would like to read the approved Appendix K document, it can be found **on the Georgia Department of Community Health website --www.dch.georgia.gov**.

All individuals enrolled in NOW and COMP waiver services are currently covered by the Appendix K. No additional application is needed.

Let's dive in a little more to recap what this means.

Appendix K and Participant-directed Model

Babs Slide -

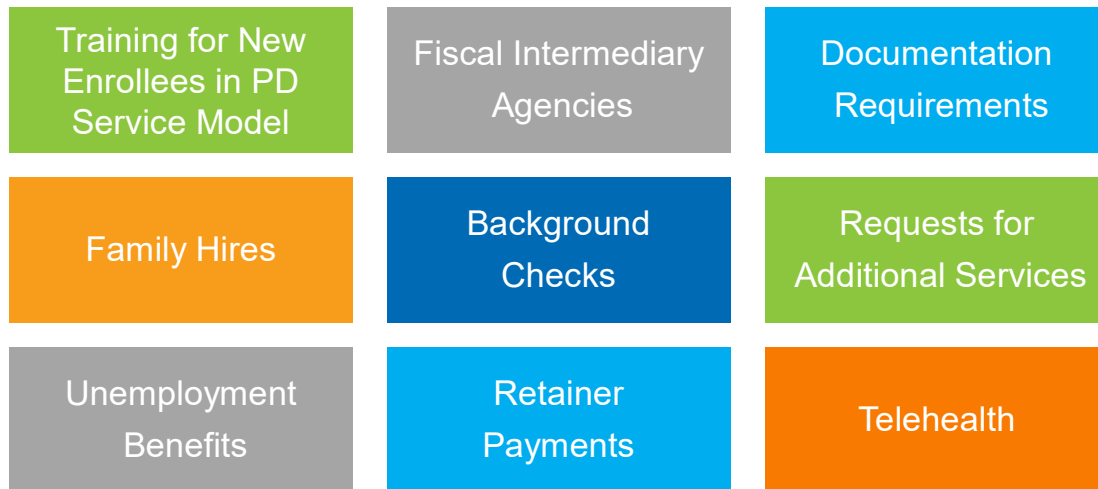
Within Appendix K documents and the operational guidance or even on calls such as this, you may hear referenced traditional providers and PD providers. When you hear or read the term traditional provider, this is referring to NOW and COMP waiver participants who use DBHDD Medicaid approved providers who deliver the services or, in other words all the waiver participants who do not self-direct or participant-direct their services. I have received a few questions about traditional versus PD, so I wanted to provide that clarity. There are about 14,000 NOW and COMP waiver participants with about 2,400 of you who choose to self-direct your waiver services. We send separate guidance and have separate meetings with these traditional providers and in the Appendix K you will see where traditional and PD model of services have differences with what is authorized.

Appendix K is a document submitted by the Georgia Department of Behavioral Health and Developmental Disability Services (DBHDD) and Georgia Department of Community Health (DCH) to the Centers for Medicaid and Medicare Services (CMS) in response to the COVID-19 Pandemic.

This standalone appendix may be utilized by the state during emergency situations to request amendment to its approved waiver.

It includes actions that states can take under the existing Section 1915(c) home and community-based waiver authority in order to respond to an emergency.

Appendix K and Participant-directed Model



Babs Slide -

1. During the period Appendix K is approved, no 6-hour in-person PD trainings for new enrollees into PD Service model will be authorized. There is no approved tele-health option for this service.
2. Fiscal Intermediary Agencies: DBHDD has had meetings with all 3 Fiscal Intermediaries and they are aware of the Appendix K. (Acumen, Continuum, Public Partnership, LLC) We meet with all 3 of the Fis weekly and they all report using their own websites to provide updates with their processes tied to Appendix K. **I advise you to review your Fis website for up to date information from them.**
3. Documentation Requirements- Documentation requirements for services rendered remain intact. The Appendix K offers several flexibilities out of recognition that service delivery looks different in the wake of this pandemic. All individuals, representatives, and family members should remember that DBHDD is open for business and continues to monitor service delivery and use of funding. DBHDD will continue to monitor for policy compliance and will refer suspicious spending and/or activity to the Office of the Inspector General for investigation
4. Family hire: Through the Participant-direction model during Appendix K authorization, DBHDD will **temporarily** allow the hire of family caregivers who live in the home with the individual receiving services through the NOW or COMP waiver. Family hire is limited to individuals who are at least 18 years in age with experience delivering

required care.

**Separately, if you already have approved family hires through the traditional route, this does not apply to you. They are already approved staff. Remember family hire approvals outside appendix K have to be renewed annually. We will go into more detail with family hires in a few mins.

5. Background checks: are temporarily waived during appendix K authorization. Fis will continue to have you complete the required paperwork for processing once Appendix K is terminated.

6. Request for Additional Services: you will need to follow the normal process and reach out to your assigned Support Coordinator/Intensive Support Coordinator to request additional service considerations. Support Coordination will follow the normal ISP Version Change or Request for Clinical Review process as appropriate based on service type. DBHDD will take in requests and process as quick as possible based on individual circumstances justifying the need for the increased services requests. DBHDD will be authorizing service increases based only on clinically assessed need.

Also note as mentioned earlier, there are just under 14,000 individuals in NOW and COMP waiver services, so processing service changes will take time and be prioritized by most urgent needs. The FI will not authorize additional service hours to you until there is an approved, revised prior authorization reflecting such so they can bill Medicaid.

7. Unemployment benefits - as the representative and employer of record, if you are laying off staff, you are required to contact your FI to assist in the filing of the claim.

8. Retainer payments- are meant to do as they are named— retain your staff to be able to come back to work once the crisis is over and staff can resume service provisions.

5. Telehealth means of service delivery is authorized for specific services within PD

Family Hires

Amy Slide

We recognize there have been many questions concerning family hires, and I am going to work to provide more information now as we have been able to finalize additional guidance.

Family Hires Under Appendix K

- 1 People eligible for Family Hire must be 18 years old.
- 2 People eligible for Family Hire must have experience with providing the required care for the waiver participant.
- 3 Family Hires must complete the enrollment process with their Fiscal Intermediary prior to any payments being authorized.
- 4 Family Hires must disclose to the Fiscal Intermediary their relationship to the Individual receiving the waiver services.
- 5 Family Hire pay rate cannot be higher than established policy allows.

Amy Slide

Ok, family hire staff. For a family member to be considered for family hire., the person must be at least 18 years in age and have experience providing the care to the individual in services.

All required forms, including copy of Social Security card of family caregiver hire staff, must be completely filled out and sent to the Fiscal Intermediary. Upon receipt of a completed packet, the Fiscal Intermediary will strive to process a 'Good to Go' letter within two business days

When a family hire is approved, family hire rate of pay cannot exceed established hourly rate allowances. Appendix K does not authorize a pay rate increase, nor hazard pay. Rate, frequency—i.e. hours per day, days per week must align with the approved prior authorization. We will discuss service level and possible budget change requests a little later in this presentation. Rate of pay for example--- with CLS, if you have been paying your CLS staff person 10.00 an hour, your rate of pay for a family hire to provide the same service during this crisis should not exceed that pay rate. When hiring on new staff you will complete the rate of pay forms.

Remember -- **family hire is temporary only**. Temporarily, it also waives the requirement

for DBHDD Field Office and Department of Community Health approval of family hires. This means you will not have to follow the normal formal family hire request process outlined in chapter 1200 of the Waiver manual. You will work directly with your FI to complete the necessary paperwork. You will not need to file this with your support coordinator or DBHDD field office.

A question asked by many from the last meeting--Can the legal guardian be a staff caregiver?

Yes – during the time that Appendix K is in effect and if the legal guardian is **not also the Employee of Record**, they can be authorized as a family hire through participant-direction.

Family Hire Definition

- As specified in the NOW and COMP Manual Part II Section 902, a Family Caregiver hire is defined as an individual's family member, by blood or marriage, who is aged 18 years or older, who may be reimbursed for providing services when there are extenuating circumstances
 - Family is defined as a person who is related by blood within the third degree of consanguinity by blood, adoption, or marriage. Third degree of consanguinity include mother, father, grandmother, grandfather, great grandfather, great grandmother, sister, brother, daughter, son, granddaughter, grandson, great granddaughter, great grandson, aunt, uncle, niece, or nephew

Amy Slide

Here is the definition for family hire pulled from the NOW and COMP policy manuals as found on the Dept. of Community Health Website. Some of you may know the policy website as MMIS.

Read definition above on the slide: Kaan.san.gwi.nuh.tee

Family Hire Under Appendix K Details

- 1 Only single-parent or single legal guardian households can have a Representative become a paid family hire staff.
- 2 A new Representative would have to be appointed.
- 3 PD MOU must be executed by the new Representative.
- 4 The required 6-hours of in-person PD training is waived.
- 5 In multi-family member households, the Representative cannot become paid staff.

Amy Slide

Please pay careful attention to this slide as it answers some previously unanswered questions related to family hire. Under the authorization of Appendix K, Employer of Record/ Representative **cannot** become a paid staff. The Appendix K does not waive this policy for NOW and COMP services. DBHDD has taken this concern into consideration and in the following situation a change can be made. If within the waiver participants home there is no other adult who can become a family caregiver hire and there is no staff coming into a home. (i.e. a single parent home), the single parent can become a paid family hire with the following process:

- the single parent/ legal guardian/representative with approval of the waiver participant will have to work to appoint another representative to temporarily serve in that role for this period.
- The new representative will have to read and sign the PD Memorandum of Understanding (MOU) and
- complete required paperwork with the FI to become the representative. Note-The 6-hour face to face training requirement is temporarily waived for this specific scenario, again, only for this specific circumstance. Then, with the new 'representative' in place, the previous representative can work with the FI to become a paid staff person. (Yes, you can be working on your family hire paperwork while working on the new representative

paperwork.)

In all other cases where there are other family caregivers who can become family hire staff in the home, the move of the representative to another representative will not be approved.

The representative will remain unpaid staff per policy and employer of record for the waiver participant. If for some reason you already received approval to be the employer of record and paid staff, the FI will be contacting you to rescind that approval. This decision has been made due to DBHDD/Medicaid Waiver Policy, as well as IRS ?? DOL ??? Reasons making it an unallowable use of the family hire provision.

DBHDD recognizes this is not was originally proposed to you for how to operate under appendix k, as I mentioned at the beginning of the call as additional guidance comes in from CMS< DOL, IRS, etc., DBHDD has to revise the way Appendix K can be utilized.

Family Hire Pay Rate/Frequency/Durations

- It is tied to the ISP (Individual Support Plan)

Example: Community Living Support (CLS) Scenario –

A staff member is normally scheduled to provide CLS services for 6 consecutive hours a day, Monday through Friday, for a total of **30 hours a week**.

- Time sheet cannot exceed the 6 hours per day/ 30 hours per week as outlined in ISP/PA.
- Retainer time sheet would also be for, and cannot exceed, 6 hours per day/ 30 hours per week

★ Reminder – CLS does not provide 24/7 care

Amy Slide

I want to give a bit more guidance now around delivery of service with a family hire. Appendix K does not waive the assessed and approved service caps within an ISP and PA. Waiver services are based on assessed needs. So, in other words, what you have been utilizing prior to March 1, 2020 is the allowable amount you are allowed to utilize during appendix K. The example on the screen here should help.

So, your ISP outlines 6 hours of CLS per day, 5 days a week (M-F) and now you have hired on a family member to provide that service during appendix K AND have the good to go letter from the FI, your time sheet would then reflect the 6 hours per day, 30 hours per week (if that is the amount of service the family staff hire has delivered) It cannot exceed that amount, but if less is delivered, that should be accurately reflected on the time sheets. If you are also wanting to pay your staff who normally would provide the service, a retainer payment AND they have not been laid off by you and collecting unemployment, the timesheet would be for the 6hours per day, 5 days a week for max of 30 hours.

I have received a lot of questions from families who state they now need CLS services 24/7 due to the individual being home. It is important to note, CLS does not cover 24/7 service delivery. If you would like consideration for an increase in CLS hours due to urgent needs tied to COVID-19, a support coordinator would have to work with you to complete the

change request for consideration by the DBHDD Regional Field Office to see if the increase meets the assessed need increase criteria. Also note, there will be potential delay in processing these requests as there are 14,000 of you and a small number of us. DBHDD will be prioritizing processing requests based on urgent need tied to the health crisis or other crisis situations.

Yes, you can bill family hire and retainer payment at the same time through Appendix K.

Family Hire Start Dates

- Federal “E-Verify” requirements, 8 C.F.R. Section 274a.2(b)(1)(ii) requires:
- (ii) Except as provided in paragraph (b)(1)(viii) of this section, an employer, his or her agent, or anyone acting directly or indirectly in the interest thereof, must within **three business days of the hire**:
- (A) Physically examine the documentation presented by the individual establishing identity and employment authorization as set forth in paragraph (b)(1)(v) of this section and ensure that the documents presented appear to be genuine and to relate to the individual; and
- (B) Complete section 2—“Employer Review and Verification”—on the Form I-9 within **three business days of the hire** and sign the attestation with a handwritten signature or electronic signature in accordance with paragraph (i) of this section.

Amy Slide

This slide is showing you the Federal e-verify requirements from the Federal Government. I know none of us want to violate labor laws. What I want you to pay specific attention to is the yellow highlight section. Per requirements a staff person hired on can only begin being paid within the 3-days of the hire on signature date. Let me translate this for you on the next slide.

Family Hire

- When a family hire staff packet is processed by the FI and the hire date is established, payroll can only be from the hire date forward.
- All billing identified under Family Hire must be tied to work completed by the Family Hire caretaker and must include completed documentation and corresponding time sheets to support the submitted invoice.

Amy Slide

Due to the Federal regulation as noted on the previous slide, you will only be able to begin paying any newly hired staff, whether regular new staff or family hire within the 3-day window of the date of hire. So, though the appendix K is retroactive back to March 1, 2020, new hired on staff cannot back bill payroll for services rendered prior to the official hire date. So, representatives, your timesheets for work completed by hired on family hire staff should match hire on date and after moving forward. I recognize this may not be the guidance you wanted to receive, but we must work within the confines of Federal regulations. This regulation has not been relaxed during the crisis. As this is an evolving crisis, if there are changes made to this in the future, DBHDD will be sure to communicate it out to you. At this time, this is how we must operate.

Required Family Hire Documentation

- Each individual who wishes to be considered for the role of Family Hire must complete the required New Hire packet with their Fiscal Intermediary (FI) agency.
 - There is some variation among what each FI agency requires.
- When all required document in the New Hire packet have been submitted to the FI agency, the Family Hire will be processed within two (2) business days by the FI agency.
- The FI will issue the 'Good to Go' letter when the Family Hire may begin proving billable services.

Amy Slide

Each of the 3 Fis has staff hire packets. They are very similar, but you need to get the staff hire packet from your FI. Within the packet, there are some forms that may be waived during Appendix K. Completed packets will be completed within 2 business days and you will be issued the 'good to go' letter from the FI.

Background Checks Under Appendix K

This requirement is temporarily suspended during the time that Appendix K is in effect.

Every effort should be made to complete background checks when possible to ensure the safety of the waiver participant.

When Appendix K is terminated, background checks must be completed retroactively within 60 days.



Amy Slide

Background checks for staff hires and any function that requires face-to-face action or availability of third-party vendors will be temporarily suspended for the duration that Appendix K is effective for all waiver services in the event the provider is unable to complete a background check. At the termination of Appendix K, background checks will need to be completed retroactively for all employees who were hired while Appendix K was effective and according to policy. This means that if you have already used up the 5 background checks this ISP year through your FI, you will have to pay for the background checks for the family caregiver hires during Appendix K. This is a stipulation in the appendix K that cannot be bypassed. We are only waiving the need for background checks during K, due to the fact fingerprinting facilities are closed.

Documentation & ISPs

- Representatives for Participant-direction model must adhere to all applicable documentation requirements.
- The specificity of such services, including amount, duration, and scope, will be added to the ISP as soon as possible, but **no later than 30 business days after service initiation.**
- ISPs should be written to reflect the date that service delivery began. The ISP must be signed by the individual or legal guardian.

Amy Slide

Documentation. I want to remind everyone that even with family hire staff all documentation of work, time sheets, notes, goals, outcomes, etc. must continue. And also remember, documentation must be maintained for at minimum 6 years, even if the waiver participant switches to traditional model of NOW or COMP waover services or discontinues waiver services. During this time, SC will not be asking to see documentation via telehealth, but normal documentation review would return upon the termination of Appendix K.

Retainer Payments

Babs Slide -

Retainer payments are authorized in the event that the provider is not serving the waiver participant under other comparable services. The retainer payment will be authorized at the level, duration, and amount as outlined in the prior authorization.

You may sometimes hear people refer to Retainer Payments as PAR – or Personal Assistance Retainer.

The purpose of Retainer payments is to ensure the network's workforce capacity following COVID-19 emergency. The retainer option should only be billed when the provider is "retaining" (maintaining the staff's employment) for when operations resumes as normal and the Appendix K is no longer effective.

PD Services Eligible for Retainer Payments

Community Living Support (CLS)

- Retainer payments are authorized in the event that the provider is not serving the member under other comparable services.
- The retainer payment will be authorized at the level, duration, and amount as outlined in the prior authorization.

Supported Employment (SE)

- In-person job coaching contacts and supports may temporarily be made remotely (i.e. phone, telehealth, email).
- This may include teleworking for any business, or essential businesses such as work at a grocery store, gas station, etc.

Babs Slide -

Under the terms of the Appendix K, you will see that there are only two services under the Participant-direction model that are authorized for temporary retainer payments: Community Living Support and Supported Employment.

The state of Georgia temporarily authorizes, during the time that the Appendix K is effective, retainer payments for Community Living Support and Supported Employment Services in the event that the provider is unable to render a service due to health and safety concerns for either the participant or the provider. The retainer payment will be authorized at the level, duration and amount as outlined in the Prior Authorization. Retainer payments can be made throughout the temporary authorization period. Retainer payments are being made to ensure provider network capacity post COVID-19 emergency.

CAG (Community Access Group) services through Appendix K for PD does **not** authorize retainer payments for staff.

Retainer Payments

- Retainers payments cannot exceed 30 consecutive days.
- DBHDD is waiting for additional guidance from Centers for Medicare & Medicaid Services (CMS) on the 30-day consecutive retainer payments.
- Until further guidance is received, Representatives may proceed with billing retainer payments through their Fiscal Intermediary agency.

Babs Slide -

As you may recall from our previous webinar, retainer payments cannot exceed 30 consecutive days.

DBHDD is waiting for additional guidance from Centers for Medicare & Medicaid Services (CMS) on the 30-day consecutive retainer payments.

Until further guidance is received, Representatives may proceed with billing retainer payments through their Fiscal Intermediary agency.

A commonly asked question is “Will PD be allowed to pay a retainer for existing employees AND pay family members as employees for services at the same time?” The Answer is Yes. Appendix K authorizes retainer payment and family hire payments simultaneously.

Family hire retainer payments only apply to family hires approved prior to March 1, 2020. Representatives need to be mindful of available budget authorized to cover services.

Retainer Payments

- Providers should submit claims for only scheduled days and units as specified in the individual's ISP and Prior Authorization (PA).
- The retainer option should only be billed when the provider is retaining (maintaining the staff's employment) it's regular staff members for when operations resume as normal and the Appendix K is no longer effective.
- Community Living Support (CLS) and Supported Employment (SE) can bill retainer payments and family hire payments simultaneously.
- If a staff member is collecting unemployment benefits, the Representative cannot bill for retainer payments at the same time.

Babs Slide -

Remember that retainer payments are meant to keep your staff on your payroll for after the pandemic ends and staff can return to work.

Providers should submit claims for only scheduled days and units as specified in the individual's ISP and Prior Authorization (PA).

One frequently asked question is, "Can you bill retainer payments for two people on one day for different hours – for example, one employee for normally works for 2 ½ hours in the morning and a second employee works for 4 hours in evening on the same day." The answer is Yes. You would indicate each employee's hours on the time sheet just as you would if they were working during their normal shifts.

Please remember that service retainers may not be billed when the employer is not maintaining the staff or the staff is accessing unemployment benefits. What this means is that if staff were laid off by the representative, you are not able to "back bill" the retainer for laid off staff.

Unemployment Benefits

- It is the responsible of the Representative to work with Fiscal Intermediary agencies to assist staff who have been laid off with filing for unemployment benefits if the staff choose to pursue those benefits.
- DBHDD cannot advise you as to whether or not file for benefits.
- For more information, please contact the Georgia Department of Labor (www.DOL.Georgia.gov).

Babs Slide -

It is the responsible of the Representative to work with their Fiscal Intermediary agencies to assist staff who have been laid off with filing for unemployment benefits if the staff choose to pursue those benefits.

Please understand, DBHDD cannot advise you whether or not file for benefits.

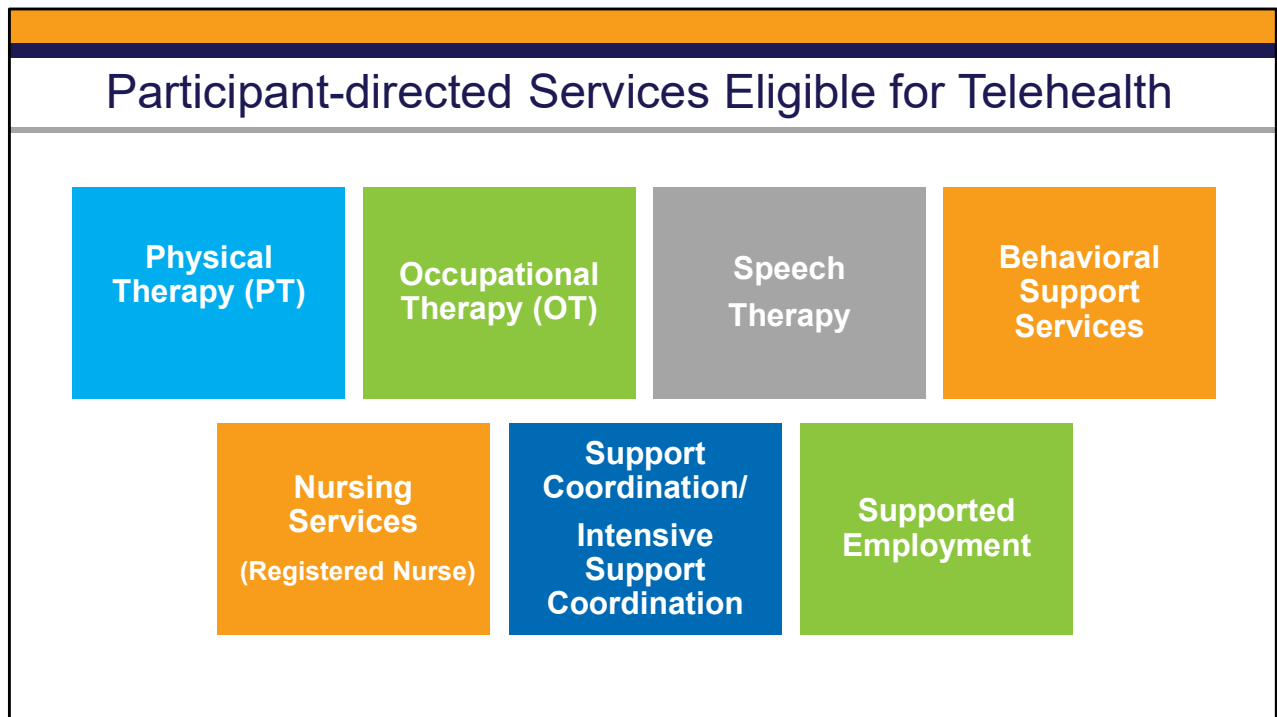
For more information, please contact the Georgia Department of Labor (www.DOL.Georgia.gov).

Telehealth

Babs Slide

As individuals all around the country have been sheltering in place and practicing social distancing, chances are you have had the opportunity to participate in some form of telehealth or video conferencing during the last month and a half.

Let's learn more about how we can use technology to continue provide care for those who are most in need under Appendix K.



Babs Slide -

As you can see from this slide, there are seven services that are authorized for telehealth through Appendix K.

Physical Therapy, Occupational Therapy, and Speech Therapy services authorized on an ISP are authorized through Appendix K for telehealth options. There are a few limitations of specific items that are not allowed through telehealth. For example, swallow evaluations cannot be done via telehealth.

For someone waiver participants, some providers such as behavior specialists have been able to continue to coming into the home to provide services. If a provider is able to provide services in-person, then you would continue to bill as you normally would.

LPN nursing services cannot be delivered via telehealth.

A frequently asked question we have received asks "If the ISP requires an updated Supports Intensity Scale (or SIS), can the SIS be performed via Telehealth? Yes, the SIS can temporarily be completed via telehealth during Appendix K authorization. Every effort is being made to ensure that evaluations for ISPs can be completed via telehealth at this time in order to eliminate the need for in-person visits. DBHDD is following the guidelines

available by the Georgia Department of Public Health and the Centers for Disease Control.

Signatures on Documents

- Individualized Support Plans (ISPs) and other annual documents require physical signatures.



Babs Slide -

An important requirement of the Appendix K is for physical or ink signatures on Individualized Support Plans and annual documents.

Your support coordinator will work with you to find an agreeable means of sending you documents for signature tied to your ISP. This includes a signature page for a version change to an ISP.

Support Coordinators may offer to email, fax, mail or drop off documents for your signature.

Appendix K did not waive signature requirements on documents.

PD Services Not Eligible for Telehealth

**Community
Living
Support
(CLS)**



**Community
Access –
Individual
(CAI)**



**Community
Access –
Group
(CAG)**



Babs Slide

Under Appendix K, Community Living Support (CLS) and Community Access Services (CAI/CAG) do not have telehealth options for participant-direction. So, this would include online social groups, virtual education options and other software programs and organizations. We have received a lot of requests for this type of service as alternative options, but this is not authorized through Appendix K.

Budgets and Prior Authorizations (PA)

Amy Slide

Appendix K does not authorize overtime payments, nor does it authorize hazard pay. Staffing hours must align with PA authorized services as we mentioned earlier with the example.

All requests for additional funding must be directed through your Support Coordinator/Intensive Support Coordinator.

Implementation of Appendix K does not provide for additional funding.

Any increases in service are based solely on the assessed needs of the waiver participant.

Changes to Your Budget & Prior Authorizations

- DBHDD will not authorize the movement of CAG/CAI funds to CLS due to the crisis.
- All requests for additional funding will go through normal ISP Version change process and will be reviewed on a case by case basis based on assessed need.
- Urgent need criteria during this time include the following:
 - The Family Caregiver is an essential worker.
 - The Family Caregiver tests positive for COVID-19 and is unable to provide care.
 - Other urgent health and safety concerns tied to COVID-19.

Amy Slide

As mentioned earlier, appendix K did not come with additional funding attached. DBHDD will take a look at service category requests on a case by case basis. For example, see the urgent needs criteria above as sample of potential criteria where funds will be considered for move to other categories.

All requests to move funds from CAG/CAI to CLS must be made through Support Coordination and will be reviewed on a case-by-case basis and is authorized based on assessed need. Please note DBHDD Regional Field Offices will be processing these requests based on urgent need criteria.

All requests for additional funding must be directed through your Support Coordinator/Intensive Support Coordinator.

There are still existing caps on services. However, the cap on some services has been raised.

Specialized Medical Supplies (SMS)

Appendix K authorizes an increased funding allowances to cover SMS during the crisis.

Communication will go out to all when the Prior Authorizations have been updated in the DBHDD Case Management System.

SMS can be used to obtain PPE.

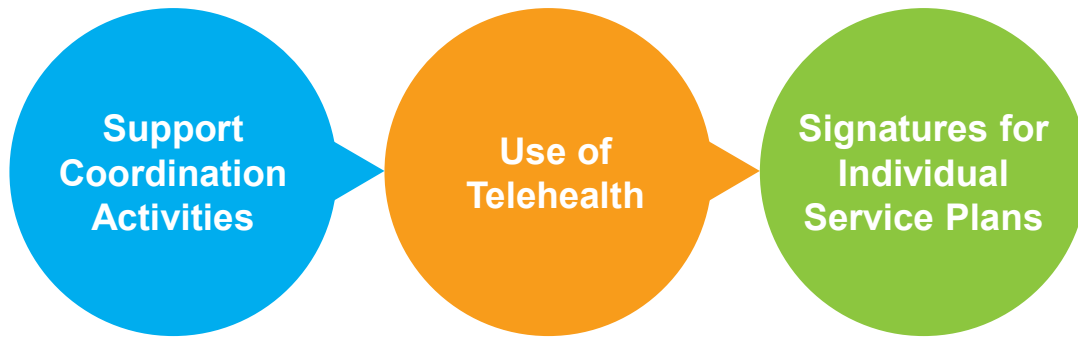
Amy Slide

Through Appendix K, DBHDD did receive authorization to increase the service caps on specific services. For Participant-directed waiver services, we recognize that there may be an increased need for specialized medical supplies due to the crisis. Policy remains in place as to the type of supplies that are authorized through SMS. Refer to Chapter 1200 of the NOW/COMP waiver policy manual on MMIS website of DCH.

Support Coordination / Intensive Support Coordination

Amy Slide-

Support Coordination and Participant-directed Model



Amy Slide

Support Coordination check-ins and activities are still a requirement for all PD participants while Appendix K is authorized.

Support Coordination work can be completed via telehealth or telephonic means during this crisis. If an individual's birthday falls while Appendix K is in effect, the Support Coordinator will work with the Individual and Representative to set up telehealth means to conduct the annual ISP meeting.

ISPs, whether annual or a version change, will require physical signatures on the ISP Signature page. Support Coordination will work with the Representative to send the Signature Page via encrypted email, fax, or US Postal Service to acquire the required signatures. It is the expectation that the individual, Representative, and other pertinent parties all physically sign the signature page and return it to the Support Coordinator. A Signature Page is required for an ISP to be processed.

Communication

Babs Slide –

During these challenging times that we are facing, good communication is absolutely imperative to ensure that we can work together in partnership with one another to ensure that the health and safety of your family members and the individuals that we serve.

How do I stay informed?

PD Model
E-newsletter

PD Model
Email Blasts

DBHDD
Webinars

DBHDD
Website

To request that your email address be added to the electronic mailing list, please contact:

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Questions

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At this time, I'm going to transition back to Director Wakefield for any comments before we open the floor for questions from our attendees.

